

# Disclosure Report Cover

Amendment
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.  
Do not use this form to update information.

<b>1. Committee Information</b>	
a. Full Name <u>Committee to Elect Matt Helms</u>	c. ID Number
b. Mailing Address (include City, State and Zip Code) <u>5315 S Rocky River Rd Monroe, NC 28112</u>	d. Date Filed <u>January 26<sup>th</sup> 2018</u>
	e. Phone Number

2. Report Year <u>2017</u>	3. Period Start Date (mm/dd/yy) <u>1/1/17</u>	4. Period End Date (mm/dd/yy) <u>12/31/18</u>	5. Treasurer Full Name <u>Matthew John Helms</u>
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<b>6. Type of Committee (Check One)</b>		<b>9. Type of Report (check only one type of report from one category)</b>	
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<b>Municipal</b>	<b>State/County</b>
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First
		<input type="checkbox"/> Pre-election	<input type="checkbox"/> Second
		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third
		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth
		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year
		<input type="checkbox"/> Final	<input checked="" type="checkbox"/> Year End
		<input type="checkbox"/> Special	<input type="checkbox"/> Final
			<input type="checkbox"/> Special
<b>7. Type of Fund (if applicable, check one)</b>		<b>10. Special Report Name</b>	
<input type="checkbox"/> Booster Fund			
<input type="checkbox"/> Building Fund			
<input type="checkbox"/> Other:			
<b>8. Number of Fundraisers this Report</b>			

<b>11. Account Information</b>		<b>11. Account Information</b>	
a. Financial Institution Full Name <u>First National Bank</u>		a. Financial Institution Full Name	
b. Purpose <u>Campaign</u>	c. Account Code <u>YB</u>	b. Purpose	c. Account Code
	d. Period Begin Balance <u>\$ 100.00</u>		d. Period Begin Balance <u>\$</u>

**CERTIFICATION**

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

<u>Matthew John Helms</u> Printed Name of Signer	<u>Matthew John Helms</u> Signature of Appointed Treasurer	<u>1/25/18</u> Date
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**FOR OFFICE USE ONLY**

Date Received: <u>1/26/18</u>	Employee: <u>KJacumir</u>	Delivery Method
Date Postmarked: <u>NA</u>	Employee: <u>KJacumir</u>	<input type="checkbox"/> Normal Mail
Date Scanned: _____	Employee: _____	<input type="checkbox"/> Registered Mail
Date Data Entered: _____	Employee: _____	<input checked="" type="checkbox"/> Hand Delivered
		<input type="checkbox"/> Electronically Filed
		<input type="checkbox"/> Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.  
You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

CRO-1000

NC State Board of Elections

August 2008

RECEIVED

JAN 26 2018

Union Co. Board of Elections

# Detailed Summary

Amendment	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Use this form to summarize all disclosure reporting forms and to total monetary information

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. Type of Report</b>	<b>3. ID Number</b>
Committee to Elect Matt Helms		Year-end	
<b>Start of Election Cycle: January 1, 2017</b>		<b>Total this Reporting Period</b>	<b>Total this Election Cycle</b>
<b>4) Cash on Hand at Start</b>		\$ 100.00	\$ 100.00
<b>RECEIPTS</b>			
<b>5) Aggregated Contributions from Individuals (CRO-1205)</b>		\$	\$
<b>6) Contributions from Individuals (CRO-1210)</b>		\$	\$
<b>7) Contributions from Political Party Committees (CRO-1220)</b>		\$	\$
<b>8) Contributions from Other Political Committees (CRO-1230)</b>		\$	\$
<b>9) Loan Proceeds (CRO-1410)</b>		\$	\$
<b>10) Refunds/Reimbursements to the Committee (CRO-1240)</b>		\$	\$
<b>11) Other Receipt Sources</b>			
<b>11a) Interest on Bank Accounts (CRO-1250)</b>		\$	\$
<b>11b) Contributions from Not-For-Profit Organizations (CRO-1250)</b>		\$	\$
<b>11c) Outside Sources of Income (CRO-1250)</b>		\$	\$
<b>11d) Legal Expense Fund - Other Sources (CRO-1270)</b>		\$	\$
<b>11e) Exempt Purchase Price Sales (CRO-1265)</b>		\$	\$
<b>12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)</b>		\$ 0	\$ 0
<b>EXPENDITURES</b>			
<b>13) Disbursements</b>			
<b>13a) Operating Expenditures (CRO-1310)</b>		\$	\$
<b>13b) Contributions to Candidates/Political Committees (CRO-1310)</b>		\$	\$
<b>13c) Coordinated Party Expenditures (CRO-1310)</b>		\$	\$
<b>14) Aggregated Non-Media Expenditures (CRO-1315)</b>		\$	\$
<b>15) Loan Repayments (CRO-1420)</b>		\$	\$
<b>16) Refunds/Reimbursements from the Committee (CRO-1320)</b>		\$	\$
<b>17) In-Kind Contributions (CRO-1510)</b>		\$	\$
<b>18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)</b>		\$ 0	\$ 0
<b>19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)</b>		\$ 100.00	\$ 100.00
<b>ADDITIONAL INFORMATION</b>			
<b>20) Non-Monetary Gifts Given to Other Committees (CRO-1330)</b>		\$	
<b>21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)</b>		\$ 100.00	
<b>22) Debts and Obligations owed by the Committee (CRO-1610)</b>		\$	
<b>23) Debts and Obligations owed to the Committee (CRO-1620)</b>		\$	
<b>24) Account Transfers Within the Committee (CRO-1720)</b>		\$	
<b>25) Administrative Support (CRO-1710)</b>		\$	\$
<b>26) Forgiven Loans (CRO-1440)</b>		\$	\$
<b>27) 48-Hour Notice Reports Sum (CRO-2220)</b>		\$	\$
<b>28) Contributions to be Returned (CRO-1215)</b>		\$	\$

CRO-1100

NC State Board of Elections

August 2008

JAN 26 2018

Union Co. Board of Elections

# Outstanding Loans

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Amendment
<input type="checkbox"/> Yes <input type="checkbox"/> No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)			2. ID Number	
Committee to Elect Matt Helms				
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments
Matt Helms 5315 S Rocky River Rd Monroe, NC 28112		Business Analyst		
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)
		City of Charlotte		1/1/2017
				f. End Date (mm/dd/yyyy)
				12/31/2017
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance
0 %	None	\$ 100.00		\$ 100.00
k. Full Name of Lending Institution				l. Loan Number
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)
				f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance
%		\$		\$
k. Full Name of Lending Institution				l. Loan Number
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove				
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession		d. Comments
		c. Employer's Name/Specific Field		e. Start Date (mm/dd/yyyy)
				f. End Date (mm/dd/yyyy)
g. Rate	h. Security Pledged	i. Original Loan Amount		j. Remaining Loan Balance
%		\$		\$
k. Full Name of Lending Institution				l. Loan Number
4. Total only this Page				\$ 100.00
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)				\$